	/	162,
5/	ARIZONA STA	ATE BOARD OF HEALTH State File No.
cach	BUREAU	J OF VITAL STATISTICS Registered No. 30
9,70	1. PLAGE OF BIRTH STANDARD	CERTIFICATE OF BIRTH
ä	County Xila	State aryona
n and the numb	County / / / /	
	District or Township	or Village
	City Mann No.V.	9. 03 of
		I II abild is not vet fixingle unas
		supplemental report, as directed.
の質	3. Sex of Child To be answered ONLY 4. Twin, tripley	or other 6. Legitimate? 7. Date 10.04 7.7 - 19.29
d &	/) in event of plural }	of birth
made 10	Temale births. 5. No., in order	of bit the state of the state o
₹ <u>₹</u>	8. FATHER	14. MOTHER
1 2	Full name Tranquilino Wel	Pull maiden name / ltlsa Vugo
ं ह		15. Residence Miami, O.
<u>.</u> 2	9. Residence (Usual place of about) Mann,	(t) start place of about)
TURN stated.	If non-resident, give place and state.	a. If non-resident, give place and state. Wyona.
	·	16. Color or ruce
k≓≑	10. Color or race	
E Z	Mht. 11. Age at hat birthday 3/	(Years) Ml. 17. Age at last birthday. 3 b. (Years)
	1	
	12. Birthplace (city or place)	18. Birthplace (city or place) Chiha alua
10/2	(State or country) Mey	(State or country)
É		19. Occupation
pic	13. Occupation	Nature of industry //
child at a birth	Nature of industry	Atomoenris _
	IIWAW	21. Were precautions taken against oph-
買	(b) Bo	rn alive and now living thalmia neonatorum? Yes
one	(Taken as of time of birth of child herein (c) Sti	liborn
than	I hereby certify that I attended the birth of this child, who was 10 M a	
) som	or midwife, then the father, householder, or house the father, householder, etc., should make this return. A stillborn	
of Of	child is one that neither breathes nor shows other evidence of life after birth.	O (Physician or midwife).
case of	snows other evidence of the arter button	Midani anana
1		Address / WWWW ON DUVING
Ţ	3/9-/20-300	- Hel 18 , 29 Ke. 6. Joons
ائو ئانو	Registrar	Filed Registrar